

Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name LEGEND'S CAFE	Telephone Number Est Own	Date of Inspection 06/03/2022	ID#		
Address 2602 CHARLESTOWN RD, NEW ALBANY IN 47150					
Owner	Purpose <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input checked="" type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released		
Owner's Address ,		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _			
Person in Charge STONEY KEITH					
Responsible Person's Email SKEITH812@GMAIL.COM					
Certified Food Handler DAMON KEITH					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"					
Section #	C	NC	R	Narrative	To Be Corrected
Summary of Violations C _____ NC _____ R _____					
Received by (name and title printed):			Inspected by (name and title printed): Thomas Snider CFS		
Received by (signature):			Inspected by (signature): <i>Thomas Snider</i>		
cc:		cc:		cc:	